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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY, TRENTON DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Mannu First name		First name
	license or passport).	Middle name	<u> </u>	Middle name
	Bring your picture identification to your meetin with the trustee.	Prasad g Last name and Suffix (Sr., Jr., II, III)	<u>.</u>	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9498		

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Debtor 1 Prasad, Mannu Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
١.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
j.	Where you live	27 Kentwood Blvd	If Debtor 2 lives at a different address:
		Brick, NJ 08724-3107 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
			Hamber, Sales, Gry, State & Zin Gode
		County County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
).	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 7. The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last Yes. 8 years? District District of New Jersey When Case number When District Case number When Case number District 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your ☐ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Debtor 1

Prasad, Mannu

bankruptcy petition.

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Case number (if known) Prasad, Mannu Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time Go to Part 4. No. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate 13. Are you filing under Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 Bankruptcy Code and are you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention Do you own or have any No. property that poses or is alleged to pose a threat of Yes. imminent and identifiable What is the hazard? hazard to public health or safety? Or do you own If immediate attention is any property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

Debtor 1

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Case number (if known) Debtor 1 Prasad, Mannu

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	riasau, Mailliu					
Par	6: Answer These Questi	ons for Re	porting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a personal. No. Go to line 16b.		defined in 11 U.S.C.§ 101(8) as "incurred by an	
			_			
		401	Yes. Go to line 17.	11:00:11:		
	16b.		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe the	nat are not consumer debts or busin	ness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. 0	Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		ou estimate that after any exempt po distribute to unsecured creditors?	roperty is excluded and administrative expenses are	
	administrative expenses are paid that funds will be		■ No			
	available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000	
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000	
		□ 100-19	99	□ 10,001-25,000	☐ More than100,000	
		200-99	99			
19.	How much do you	s 0 - \$9	50.000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		□ \$500,0	001 - \$1 million	— \$100,000,001 - \$500 millio	n	
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 millio	n in	
Par	7: Sign Below					
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.				
				m aware that I may proceed, if eli e under each chapter, and I choose	gible, under Chapter 7, 11,12, or 13 of title 11, United to proceed under Chapter 7.	
			ney represents me and I did not pa ined and read the notice required I		not an attorney to help me fill out this document, I	
		I request	relief in accordance with the chap	oter of title 11, United States Code	, specified in this petition.	
		case can			y or property by fraud in connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
		Mannu Signature	Prasad of Debtor 1	Signature of I	Debtor 2	
		Executed	on <u>January 30, 2020</u> MM / DD / YYYY	Executed on	MM / DD / YYYY	

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Debtor 1 Prasad, Mannu Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mary Beth Schroeder	Date	January 30, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Mary Beth Schroeder		
Printed name		
Law Office of Mary Beth Schroeder Firm name		
802 Main St. Unit 2A		
Toms River, NJ 08753		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	marybeth@schroedermb-law.com
Mary Beth Schroeder		
Par number 9 State		<u> </u>

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Fill in this	s information to identi	fy your case:		
Debtor 1	Mannu Prasad First Name	Middle Name	Last Name	
Debtor 2	i not reame	madic Name	Lastivallie	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVISION	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,519.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,519.00
Pai	t 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & Chedule E/F	\$	53,523.81
	Your total liabilities	\$	53,523.81
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	1,181.16
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,188.50
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your oth	er schedul	es.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a perpurpose." 11 LLS C & 101(8) Fill out lines 8-9g for statistical purposes. 28 LLS C & 159		nily, or household

- purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Prasad, Mannu Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,345.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		<u> Documer</u>	nt Page 10 of 65	
Fill in th	is information to ident	ify your case and this filing	:	
Debtor 1	Mannu Prasad			
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERS	EY, TRENTON DIVISION	
Coco numbor				
Case number _				☐ Check if this is an amended filing
				amenaea ming
O((; ;) E	400 A /D			
Official Fo	orm 106A/B			
Schedul	le A/B: Prop	perty		12/15
			e. If an asset fits in more than one category, list the a	sset in the category where you
			people are filing together, both are equally responsible On the top of any additional pages, write your name a	
Answer every ques		. и обранию опостью ино толин	on the top of any assuments pages, in the year manners	ia caco mamaca (ii iiiiciiii).
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In	
rait i. Boodinso	Lacii Roolaciico, Ballalli	g, Lana, or Other Roar Lotato 1	54 5411 51 Have all illicitost ill	
l. Do you own or l	have any legal or equitable	le interest in any residence, bu	ilding, land, or similar property?	
■ No. Go to Par	rt 2.			
☐ Yes. Where i	is the property?			
— 100. Whole i	io the property.			
Part 2: Describe	Your Vehicles			
			les, whether they are registered or not? Include a : Executory Contracts and Unexpired Leases.	ny vehicles you own that
3. Cars, vans, tr	ucks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
L les				
1 Motorough si	roroft motor homes. A	TVo and other recreational	vahialan athaw vahialan and accessorian	
•	-		vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	
•			•	
■ No				
☐ Yes				
			ies from Part 2, including any entries for pages	\$0.00
.you have all	doned for Furt 2. Write	that namber here		
Part 3: Describe	Your Personal and Hous	sehold Items		
Do you own or I	have any legal or equit	able interest in any of the fo	ollowing items?	Current value of the
				portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings	P 12 12 1		
Examples: Ma	ajor appliances, turniture	, linens, china, kitchenware		
Yes. Desc	riha			
_ 103. Desc		usehold goods and furn	ishings	\$3,000.00
	Joeu IIO	aconora godao ana ram	90	
7 Flacture				
 Electronics Examples: Te 	elevisions and radios; aud	lio, video, stereo, and digital e	quipment; computers, printers, scanners; music colle	ections; electronic devices
ind		neras, media players, games		
Пио				

☐ No

Yes. Describe.....

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	Prasad, Mannu Case number (if known)	
	Used personal electronic devices including cell phone and home computer	\$300.00
Example No	oles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or collections, memorabilia, collectibles	baseball card collections; other
☐ Yes.	Describe	
Example No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and instruments Describe	I kayaks; carpentry tools; musica
■ No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
1. Clothes Examp No		
— 103.	Used men's clothing	\$400.00
Examp	les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold	, silver
Examp No Yes.		
□ No ■ Yes. 3. Non-far Examp ■ No	Describe Used men's jewelry including bracelet and necklace, ear ring m animals	
Examp No Yes. Non-far Examp No Yes. Any oth No	Describe Used men's jewelry including bracelet and necklace, ear ring m animals des: Dogs, cats, birds, horses	
Examp No Yes. Non-far Examp No Yes. Any oth No Yes.	Describe Used men's jewelry including bracelet and necklace, ear ring manimals des: Dogs, cats, birds, horses Describe Describe Describe	
Examp No Yes. Non-far Examp No Yes. Any oth No Yes. Any oth Part 3	Describe Used men's jewelry including bracelet and necklace, ear ring manimals les: Dogs, cats, birds, horses Describe Describe Describe Describe Describe Describe her personal and household items you did not already list, including any health aids you did not list Give specific information	\$500.0
Examp No Yes. Non-far Examp No Yes. Any oth No Yes. Add tl Part 3	Describe Used men's jewelry including bracelet and necklace, ear ring m animals des: Dogs, cats, birds, horses Describe Describe information Describe information Describe information	\$500.0
Examp No Yes. No Yes. No Yes. Any oth No Yes. Any oth Part 3	Describe Used men's jewelry including bracelet and necklace, ear ring manimals les: Dogs, cats, birds, horses Describe Describe your financial Assets	\$4,200.00 Current value of the portion you own? Do not deduct secured

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

Case 20-11512-KCF Doc 1 Filed 01/30/20 Entered 01/30/20 14:06:43 Page 12 of 65 Document Debtor 1 Case number (if known) Prasad, Mannu Institution name: Yes..... \$300.00 17.1. **Savings Account** WellsFargo ending 4009 Wells Fargo ending 8769 \$4.00 17.2. **Savings Account** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. \$975.00 **Landlord Security deposit** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

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De	ו וטוטפ	Prasad, Mannu		Case number (if kno	wn)
Mo	oney or	property owed to yo	u?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to you			
	■ No □ Yes.	Give specific informati	on about them, including whether y	ou already filed the returns and the tax years	
	Exam ■ No	/ support ples: Past due or lump Give specific informati	77.1	nild support, maintenance, divorce settlement, prope	erty settlement
	Exam		sability insurance payments, disabi I made to someone else	ility benefits, sick pay, vacation pay, workers' compe	nsation, Social Security benefits;
		sts in insurance polic ples: Health, disability,		count (HSA); credit, homeowner's, or renter's insura	nce
	☐ Yes.	Name the insurance of	ompany of each policy and list its v Company name:	alue. Beneficiary:	Surrender or refund value:
	If you died. No			b has died a life insurance policy, or are currently entitled to rece	vive property because someone has
	Exam ■ No		yment disputes, insurance claims	a lawsuit or made a demand for payment , or rights to sue	
	■ No	contingent and unliquent contingent and unliquent continues.	•	including counterclaims of the debtor and rights	to set off claims
	■ No	nancial assets you die	•		
36				uding any entries for pages you have attached f	\$1,319.00
Pa	rt 5: De	escribe Any Business-R	elated Property You Own or Have a	n Interest In. List any real estate in Part 1.	
37.	Do you	own or have any legal o	r equitable interest in any business	-related property?	
_	_	o to Part 6.			
	→ Yes.	Go to line 38.			
Pa			commercial Fishing-Related Propert st in farmland, list it in Part 1.	y You Own or Have an Interest In.	

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Case 20-11512-KCF Doc 1 Filed 01/30/20 Entered 01/30/20 14:06:43 Desc Main Page 14 of 65 Document Debtor 1 Case number (if known) Prasad, Mannu ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 Part 3: Total personal and household items, line 15 \$4,200.00 58. Part 4: Total financial assets, line 36 \$1,319.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00

\$0.00

Copy personal property total

\$5,519.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

61.

\$5,519.00

\$5,519.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in thi	is information to identif	y your case:		
Debtor 1	Mannu Prasad			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY, TRENTON DIVISION	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with	you.
----	--	------

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption	
Used household goods and furnishings Line from Schedule A/B 6.1	\$3,000.00	■ .	\$3,000.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)	
Used personal electronic devices including cell phone and home	\$300.00		\$300.00	11 USC § 522(d)(3)	
computer Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Used men's clothing Line from Schedule A/B 11.1	\$400.00		\$400.00	11 USC § 522(d)(5)	
Line nom ourious 772. TTT			100% of fair market value, up to any applicable statutory limit		
Used men's jewelry including bracelet and necklace, ear ring	\$500.00	•	\$500.00	11 USC § 522(d)(4)	
Line from Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
WellsFargo ending 4009 Line from Schedule A/B 17.1	\$300.00	•	\$300.00	11 USC § 522(d)(5)	
			100% of fair market value, up to any applicable statutory limit		

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Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Wells Fargo ending 8769 Line from <i>Schedule A/B</i> : 17.2	\$4.00		\$4.00 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(5)
	_andlord Security deposit	\$975.00		\$975.00	11 USC § 522(d)(5)
	The Holl Schedule A/D, 22.1			100% of fair market value, up to any applicable statutory limit	
(I	Are you claiming a homestead exemption o Subject to adjustment on 4/01/22 and every 3 y ■ No □ Yes. Did you acquire the property covered □ No	ears after that for cases	s filed	,	

Yes

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Fill in th	is information to identif	y your case:			
Debtor 1	Mannu Prasad	NE LUI N			
	First Name	Middle Name	Last Name	ł	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, TRENTON DIVISION		
Case number					
(if known)					☐ Check if this is
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Document	Page 18	of 65		
Fill in t	his information to identify you	r case:				
Debtor 1	Mannu Prasad					
Debtor 1	First Name	Middle Name	Last Name		- }	
Debtor 2					_	
(Spouse if, fi	ling) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	, TRENTON D	IVISION		
•					- }	
Case num (if known)	nber				☐ Check if th	is is an
					amended f	
						J
	Form 106E/F					
Sched	ule E/F: Creditors W	ho Have Unsecured	d Claims		•	12/15
Schedule G D: Creditor the Continu case numb	ory contracts or unexpired leases i: Executory Contracts and Unexpi is Who Have Claims Secured by Pr lation Page to this page. If you have er (if known).	red Leases (Official Form 106G). operty. If more space is needed, o re no information to report in a Pa	Do not include a copy the Part yo	iny creditors with partia u need, fill it out, numbo	Ily secured claims that are liser the entries in the boxes on	ted in Schedule the left. Attach
	List All of Your PRIORITY Un					
	y creditors have priority unsecured	d claims against you?				
■ No	. Go to Part 2.					
☐ Ye	3.					
Part 2:	List All of Your NONPRIORITY	/ Unsecured Claims				
	creditors have nonpriority unsec					
		- ,		dulaa		
	You have nothing to report in this pa	art. Submit this form to the court with	n your other sche	aules.		
Yes	S.					
unsecu	l of your nonpriority unsecured claured claim, list the creditor separately ne creditor holds a particular claim, li	for each claim. For each claim liste	d, identify what ty	pe of claim it is. Do not li	st claims already included in Pa	rt 1. If more
					Total cla	ıim
4.1 B	ank of America	Last 4 digits of ac	count number	5288		\$1,885.00
	onpriority Creditor's Name					- + 1,0 00100
Б	O Box 982238	When was the del	ot incurred?	2018-05		
_	I Paso, TX 79998-2238					
	umber Street City State Zip Code	As of the date you	ı file, the claim i	s: Check all that apply		
W	ho incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and and	ther Type of NONPRIC	RITY unsecured	l claim:		
	Check if this claim is for a comm	nunity				
	ebt			ration agreement or divor	ce that you did not	
	the claim subject to offset?	report as priority cl				
	No	•	·	g plans, and other similar	debts	
] Yes	Other. Specify	Revolving	account		

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Prasad, Mannu	Case number (f known)				
Barclays Bank Delaware	Last 4 digits of account number	0976	\$5,297.00		
Nonpriority Creditor's Name	When was the debt incurred?	2018-08			
PO Box 8803 Wilmington, DE 19899-8803 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Revolving	account			
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	9399	\$2,131.11		
	When was the debt incurred?				
PO Box 30285 Salt Lake City, UT 84130-0285					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify				
Capital One Bank USA N	Last 4 digits of account number	9296	\$2,279.00		
Nonpriority Creditor's Name	When was the debt incurred?	2009-11			
PO Box 30281 Salt Lake City, UT 84130-0281		2003 11			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte			
■ No	Debts to pension or profit-snaring				
LIYAS	- Other Cresify REVOIVING	account			

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Debtor	1 Prasad, Mannu		Case number (f known)	
4.5	Comenity Bank/Express Nonpriority Creditor's Name	Last 4 digits of account number	2474	\$403.00
	PO Box 182789	When was the debt incurred?	2019-04	
	Columbus, OH 43218-2789 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim: ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin		
	Yes	Other. Specify Revolving	account	
4.6	Credit One Bank NA Nonpriority Creditor's Name	Last 4 digits of account number	1493	\$197.00
-	PO Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred?	2019-05	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Lalatan	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other Specify Revolving		
4.7	Discover Fin Svcs LLC Nonpriority Creditor's Name	Last 4 digits of account number	6306	\$7,323.00
	PO Box 15316	When was the debt incurred?	2017-07	
	Wilmington, DE 19850-5316 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other Specify Revolving	account	

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Debto	Prasad, Mannu		Case number (f known)	
4.8	Hsbc Bank Nonpriority Creditor's Name	Last 4 digits of account number	4381	\$1,283.00
	PO Box 2013	When was the debt incurred?	2018-03	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Revolving		
4.9	Jpmcb Card Nonpriority Creditor's Name	Last 4 digits of account number	8457	\$1,479.00
	PO Box 15369	When was the debt incurred?	2018-10	
	Wilmington, DE 19850-5369 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	ration agreement or divorce that you did not	
	Yes	Other. Specify Revolving		
4.10	Macys/dsnb Nonpriority Creditor's Name	Last 4 digits of account number	8015	\$768.00
	PO Box 8218 Mason, OH 45040-8218	When was the debt incurred?	2018-05	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Student loans	aration agreement or divorce that you did not	
	□ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other Specify Revolving		

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Debtor	1 Prasad, Mannu		Case number (f known)	
4.11	Merrick Bank Corp	Last 4 digits of account number	1823	\$5,708.00
	Nonpriority Creditor's Name	When was the debt incurred?	2010-10	
	PO Box 9201 Old Bethpage, NY 11804-9001 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Revolving	account	
4.12	PayPal Credit Nonpriority Creditor's Name	Last 4 digits of account number		\$2,195.70
		When was the debt incurred?		
	PO Box 5018 Timonium, MD 21094-5018 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin		
	□Yes	Other. Specify		
4.13	Pnc Bank	Last 4 digits of account number	7539	\$5,400.00
	Nonpriority Creditor's Name	When was the debt incurred?	2016-11	
	PO Box 3180 Pittsburgh, PA 15230-3180			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debte	
	■ No	Debts to pension or profit-snaring		

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Debtor	1 Prasad, Mannu		Case number (f known)		
4.14	Pnc Bank, N.A.	Last 4 digits of account number	4917	\$4,618.00	
	Nonpriority Creditor's Name	When was the debt incurred?	2017-08		
	PO Box 3180 Pittsburgh, PA 15230-3180 Number Street City State Zip Code Who incurred the debt? Check one.	, PA 15230-3180 City State Zip Code As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa	a claim:		
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharin			
	Yes	Other. Specify Revolving	account		
4.15	Syncb/cheapoair Dc Nonpriority Creditor's Name	Last 4 digits of account number	0677	\$1,875.00	
	C/o PO Box 965022	When was the debt incurred?	2019-02		
	Orlando, FL 32896-5022 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing			
	Yes	■ Other. Specify Revolving	account		
4.16	Syncb/ppc Nonpriority Creditor's Name	Last 4 digits of account number	1156	\$2,331.00	
	Nonpholity Oreditors Name	When was the debt incurred?	2018-10		
	PO Box 965005 Orlando, FL 32896-5005 Number Street City State Zip Code	As of the date you file, the claim	s: Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneok all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	1.11.		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a ciaim:		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□ ves	Other Const. Revolving	account		

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Debtor	1 Pra	sad, N	Mannu		Case r	number (if known)	
4.17			Card Services	Last 4 digits of account numb	er <u>545</u> 5	5	\$8,351.00
	Nonprio	rity Cred	ditor's Name	When was the debt incurred?	2018	8-02	
	РО В	ox 770)53			<u> </u>	
-	Minne	apoli	s, MN 55480-7753 City State Zip Code		m in Chas	al all that apply	
			he debt? Check one.	As of the date you file, the cla	m is: Chec	ж ан тпат арріу	
	_	tor 1 onl		Continuent			
	☐ Deb		•	☐ Contingent			
	_		y d Debtor 2 only	☐ Unliquidated			
	_		of the debtors and another	☐ Disputed Type of NONPRIORITY unsecu	ıred claim:		
			s claim is for a community	☐ Student loans			
	debt	CK II UII	s ciaini is ior a community	Obligations arising out of a s	eparation a	greement or divorce that you did not	
	Is the c	laim su	bject to offset?	report as priority claims	.,	3 ······,····,····	
	■ No			☐ Debts to pension or profit-sha	aring plans,	, and other similar debts	
	☐ Yes			Other. Specify Revolving	g accou	ınt	_
Part 3:	List	Others	to Be Notified About a De	bt That You Already Listed			
is tryir have n	ng to col	lect fro n one c	m you for a debt you owe to s	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac or submit this page.	in Parts 1	or 2, then list the collection agenc	y here. Similarly, if you
Name ar				On which entry in Part 1 or Part 2 did y		9	
Chase PO Bo			er Services	Line 4.9 of (Check one):		: Creditors with Priority Unsecured Cla	
		-	9886-5548		■ Part 2:	: Creditors with Nonpriority Unsecured	d Claims
	J ,			Last 4 digits of account number	8	3457	
Name ar	nd Addre	ss		On which entry in Part 1 or Part 2 did y	ou list the	original creditor?	
HSBC			es,	Line 4.8 of (Check one):	Part 1:	: Creditors with Priority Unsecured Cla	aims
PO Bo Buffalo			-2103		Part 2:	: Creditors with Nonpriority Unsecured	d Claims
Dullai	O, IN I	14240	-2103	Last 4 digits of account number	4	1381	
Name ar	nd Addre	ss		On which entry in Part 1 or Part 2 did y	/ou list the	original creditor?	
			nagement	Line 4.3 of (Check one):		: Creditors with Priority Unsecured Cla	aims
			Reina Ste 100		Part 2:	: Creditors with Nonpriority Unsecured	d Claims
San Di	iego, (CA 92°	108-3003	Last 4 digits of account number	9	9399	
Name ar			nangement, INC	On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one):		original creditor? : Creditors with Priority Unsecured Cla	aime
8875 A				Line 414 of (Oncor one).	_	: Creditors with Nonpriority Unsecured	
San Di	iego, (CA 92°	123-2255				2 Olaii113
				Last 4 digits of account number	9	9296	
Name ar				On which entry in Part 1 or Part 2 did y		S .	
PNC B				Line 4.14 of (<i>Check one</i>):		: Creditors with Priority Unsecured Cla	
2730 L P5-PC			VISC		Part 2:	: Creditors with Nonpriority Unsecured	d Claims
Pittsb			222				
				Last 4 digits of account number	4	1917	
Don't do		41- a A	warmta fan Faak Trong af Il	managed Claims			
Part 4:			nounts for Each Type of Un	nsecured Claim aims. This information is for statistica	l roportino	n nurnosas anly 29 H S C 8150 Ac	ld the amounts for each
	ne amoi f unsecu			anna. Tina imonination is for statistica	ı reporting	, parposes offiy. 20 0.3.6. §139. A0	ia the amounts for each
						Total Claim	
		6a.	Domestic support obligation	ns	6a.	\$	0
Total cla		6b.	Taxes and certain other deb	ts you owe the government	6b.	\$ 0.00	n
		6c.		I injury while you were intoxicated	6c.	\$ 0.00	

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
01	-	01	. —	
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00

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Debtor 1 Prasad, Mannu

Case number (f known)

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total claims	6f.	Student loans	6f.	\$ Total Claim 0.00
from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 53,523.81
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 53,523.81

Official Form 106 E/F

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Fill in th	nis information to identi	fy your case:			
Debtor 1	Mannu Prasad				
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY, TRENTON DIVISION		
Case number					
(if known)					☐ Check if this is
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Kentwood Construction Co, Inc PO Box 746 Short Hills, NJ 07078-0746 Residential apartment lease for 1085. per month.

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		Docume	ent Page 27 of	65	
Fil	II in this information to identi	y your case:			
Debtor 1	Mannu Prasad				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVIS	SION	
Casa numb	hor				
Case numb (if known)	Dei				☐ Check if this is an
					amended filing
o					
Official	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
	er (if known). Answer every o	•	o not list either spouse as	a codebtor.	
■ No □ Yes	S				
	hin the last 8 years, have you rnia, Idaho, Louisiana, Nevada,				ates and territories include Arizona,
■ No.	Go to line 3.				
☐ Yes	s. Did your spouse, former spous	se, or legal equivalent live w	vith you at the time?		
line 2 : 106D), Colum	again as a codebtor only if th , Schedule E/F (Official Form nn 2.	at person is a guarantor	or cosigner. Make sure	you have listed the cred e Schedule D, Schedule I	,
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The credit	for to whom you owe the debt that apply:
				_	,
3.1	Name			_ ☐ Schedule D, line	
	Hamo			☐ Schedule E/F, line ☐ Schedule G, line	
_				_ Scriedule G, line	
	Number Street	State	ZIP Code	_	
	City	State	ZIP Code		
3.2				Cohodula D. lina	
	Name			☐ Schedule D, line ☐ Schedule E/F, line	<u> </u>
				☐ Schedule G, line	<u> </u>
_	Number Ctreet			_	
	Number Street City	State	ZIP Code		

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E:11	:- 4b:- :-f4:					•				
	in this information to identify your captor 1 Mannu Pras									
	otor 2				_					
Uni	ted States Bankruptcy Court for the	DISTRICT OF NEW .	IERSEY, TRENTON	I DIVISION	<u> </u>					
	se number 		-					ed filing	g postpetition o	chapter 13
0	fficial Form 106I					_	MM / DD/ \		wing date.	
S	chedule I: Your Inco	ome				IV.	VIIVI / DD/			12/1
sup spo atta	s complete and accurate as possiplying correct information. If you use. If you are separated and your ch a separate sheet to this form. Out the Describe Employment	are married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse is de informa	livii atioi	ng with y n about y	ou, inclu our spou	de informa ise. If mor	ation about you e space is ne	our eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Linployment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Cashier							
	Include part-time, seasonal, or self-employed work.	Employer's name	Nitin D Desai							
	Occupation may include student o homemaker, if it applies.	FEMPloyer's address	2900 Bridge A Point Pleasan 08742-4269		NJ					
		How long employed the	nere? <u>12 yea</u>	ars			_			
Par	t 2: Give Details About Mon	thly Income								
	mate monthly income as of the da ss you are separated.	te you file this form. If y	ou have nothing to re	eport for an	y line	e, write \$0	0 in the sp	ace. Includ	le your non-filir	ng spouse
	u or your non-filing spouse have more ce, attach a separate sheet to this for		bine the information f	or all emplo	oyers	s for that	person on	the lines b	elow. If you ne	ed more
						For Del	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$	1	,345.50	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	1.3	45.50	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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sad, Mannu	_	Case r	number (if known)		
		For	Debtor 1		otor 2 or ng spouse
e 4 here	4.	\$	1,345.50	\$	N/A
ayroll deductions:					
x, Medicare, and Social Security deductions	5a.	\$	164.34	\$	N/A
andatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A
luntary contributions for retirement plans	5c.	<u>*</u> —	0.00	\$	N/A
quired repayments of retirement fund loans	5d.	<u> </u>	0.00	\$	N/A
surance	5e.	\$	0.00	\$	N/A
mestic support obligations	5f.	\$	0.00	\$	N/A
ion dues	5g.	\$ _	0.00	\$	N/A
her deductions. Specify:	5h.+	\$		+ \$	N/A
payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	164.34	\$	N/A
e total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,181.16	\$	N/A
ther income regularly received: t income from rental property and from operating a business, ofession, or farm ach a statement for each property and business showing gross reipts, ordinary and necessary business expenses, and the total onthly net income.	8a.	\$	0.00	\$	N/A
erest and dividends	8b.	\$	0.00	\$	N/A
mily support payments that you, a non-filing spouse, or a dependen gularly receive clude alimony, spousal support, child support, maintenance, divorce	t	-		·	
ttlement, and property settlement.	8c.	\$	0.00	\$	N/A
employment compensation	8d.	»—	0.00	\$	N/A
cial Security her government assistance that you regularly receive clude cash assistance and the value (if known) of any non-cash assistance it you receive, such as food stamps (benefits under the Supplemental trition Assistance Program) or housing subsidies. ecify:	8e. 8f.	\$ \$	0.00	\$ \$	N/A
nsion or retirement income	— 8g.	<u>\$</u> —	0.00	\$	N/A
her monthly income. Specify:	8h.+	\$		+ \$	N/A
ther income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
e monthly income. Add line 7 + line 9. entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	+ \$_	N	#/A = \$1,181.16
nds or relatives.	dependent			Schedule .	<i>J.</i> 11. + \$ 0.00
			•		12. \$ 1,181.16
expect an increase or decrease within the year after you file this form	1?				Combined monthly income
expe	ibutions from an unmarried partner, members of your household, your or relatives. le any amounts already included in lines 2-10 or amounts that are not account in the last column of line 10 to the amount in line 11. The responding on the Summary of Schedules and Statistical Summary of Certain	ibutions from an unmarried partner, members of your household, your dependent or relatives. e any amounts already included in lines 2-10 or amounts that are not available to pount in the last column of line 10 to the amount in line 11. The result is the mount on the Summary of Schedules and Statistical Summary of Certain Liabilities. ect an increase or decrease within the year after you file this form?	ibutions from an unmarried partner, members of your household, your dependents, you or relatives. e any amounts already included in lines 2-10 or amounts that are not available to pay expendent in the last column of line 10 to the amount in line 11. The result is the combination on the Summary of Schedules and Statistical Summary of Certain Liabilities and sect an increase or decrease within the year after you file this form?	ibutions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives. e any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in the last column of line 10 to the amount in line 11. The result is the combined monthly incomount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is the combined monthly incomount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is the combined monthly incompared to the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is the combined monthly incompared to the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is the combined monthly incompared to the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is the combined monthly incompared to the Summary of Schedules and Statistical Summary of Sched	ibutions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives. e any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule</i> and the second of the s

Official Form 106l Schedule I: Your Income page 2

Fill in	this information to	dentify yo	ur case:			ı		
Debto		nu Prasa				Che	eck if this is:	
							An amended filing	
Debto (Spou	or 2 use, if filing)						A supplement show expenses as of the	ving postpetition chapter 13 following date:
United	d States Bankruptcy C	ourt for the:	DISTRI DIVISIO	CT OF NEW JERSEY, TF	RENTON		MM / DD / YYYY	
Case (If kno	number 							
						J		
Off	icial Form 1	106J						
Sc	hedule J: \	our E	Expen	ses				12/1
infor		ace is nee	ded, attac	If two married people are th another sheet to this f				supplying correct ur name and case numbe
Part 1			hold					
	Is this a joint case	?						
	■ No. Go to line 2. □ Yes. Does Debt	or 2 live in	n a separa	te household?				
	☐ No ☐ Yes. Del	otor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate Housel	holdof Debto	or 2.	
2.	Do you have depe	ndents?	■ No					
	Do not list Debtor 1 Debtor 2.	and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents names							☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
								□ No
_	_							☐ Yes
	Do your expenses expenses of peopl yourself and your	e other th	an _	No Yes				
Part 2								
expe				ptcy filing date unless your is filed. If this is a suppl				
				overnment assistance if				
	e of such assistand cial Form 106l.)	e and hav	ve include	ed it on Schedule I: Your	Income		Your exp	enses
	The rental or home payments and any re			ses for your residence. In lot.	nclude first mortgage	4.	\$	600.00
	If not included in li	ne 4:						
	4a. Real estate ta	ixes				4a.	\$	0.00
	4b. Property, hom	neowner's,	or renter's	insurance		4b.	\$	0.00
				ipkeep expenses		4c.	· —————————	0.00
				lominium dues u r residence. such as hor	ne equity loops	4d. 5.		0.00
i) .	AGUIUGIAI IIIGI (UZ)	u c paviile	ina ioi vo	ur residence, such as NOI	ue econo dans	;).	d)	11 (11)

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ebtor 1 _ F	Prasad, Mannu	Case num	ber (if known)	
Utilities	:			
	Electricity, heat, natural gas	6a.	\$	25.00
6b. V	Vater, sewer, garbage collection	6b.	\$	0.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	60.00
6d. C	Other. Specify:	6d.	\$	0.00
Food a	nd housekeeping supplies	7.	\$	225.00
Childca	are and children's education costs	8.	\$	0.00
Clothin	g, laundry, and dry cleaning	9.	\$	50.00
Person	al care products and services	10.	\$	25.00
Medica	ıl and dental expenses	11.	\$	20.00
Transp	ortation. Include gas, maintenance, bus or train fare.			
	include car payments.	12.	\$	100.00
Enterta	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
Charita	ble contributions and religious donations	14.	\$	0.00
Insurar	nce.			
	include insurance deducted from your pay or included in lines 4 or 20.		_	
	ife insurance	15a.	·	0.00
	Health insurance	15b.	·	0.50
	/ehicle insurance	15c.	·	75.00
	Other insurance. Specify: renters insurance	15d.	\$	8.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify		16.	\$	0.00
	nent or lease payments:	47-	Φ.	
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
Other r	ed from your pay on line 5, Schedule I, Your Income (Official Form 106l). Dayments you make to support others who do not live with you.	10.	\$	0.00
Specify		19.	Ψ	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Schee		r Income.	
	Nortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Aaintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.		0.00
Other:		21.		0.00
01.1011				0.00
	ate your monthly expenses			
	ld lines 4 through 21.		\$	1,188.50
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Ad	ld line 22a and 22b. The result is your monthly expenses.		\$	1,188.50
Colouda	sto your monthly not income			,
	ate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	220	¢	4 404 40
	, ,	23a.		1,181.16
23D. C	Copy your monthly expenses from line 22c above.	23b.	-\$	1,188.50
222 (Subtract value manthly are and as from value manthly income			
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-7.34
	no rosultis your monuny not income.		<u> </u>	<u> </u>
	expect an increase or decrease in your expenses within the year after yo			
For exar	nple, do you expect to finish paying for your car loan within the year or do you expect you			se or decrease because of a
	tion to the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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Debte	or 1 Prasad, Mannu		Case number	er (if known)	
Fill in	this information to identify you	ur case:			
Debto	r 1 Mannu Prasa	, d	Check if	this is:	
20010	iviaiiiu Fiasa	iu .		amended filing	
Debto	r 2				postpetition chapter 13
(Spou	se, if filing)		ехр	enses as of the follo	wing date:
United	States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY, TR DIVISION	ENTON MN	I / DD / YYYY	
Case	number				
(If kno	own)				
			⊔		
Off	icial Form 106J-2	2			
		 r Expenses for Sepa	arata Housahold (of Debtor 2	12/15
		rate household expenses ONLY IF			
Debt	or 2 have one or more depei	ndents in common, list the depende	ents on both Schedule J and th	his form. Answer	the questions on this
		ses for Debtor 2 that are not reporte o this form. On the top of any addit			
ques		o and form. On the top of any duals	nonai pages, write your name	and case namber (in Kilowilj. Allower every
Part '	Describe Your Housel	nold			
	Do you and Debtor 1 mainta ☐ No. Do not complete t				
	■ Yes				
_	_	-			
2.	Do you have dependents?	■ No			
	Do not list Debtor 1 but list all other dependents	☐ Yes.			
	of Debtor 2 regardless				
	of whether listed as a dependent of Debtor 1	Fill out this information for	Dependent's relationship to	Dependent's	Does dependent
	on Schedule J.	each dependent	Debtor 2	age	live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□No
					☐ Yes
					□ No
					☐ Yes
					□ No
				_	☐ Yes
	Do your expenses include expenses of people other th	■ No			
	yourself and your depender				
Part 2					
	nate your expenses as of yo nses as of a date after the b	ur bankruptcy filing date unless yo ankruptcy is filed.	ou are using this form as a sup	plement in a Chapt	er 13 case to report
•			and the same the same transfer		
such	assistance and have includ	on-cash government assistance if y ed it on Schedule I: Your Income (C	you know the value of Official Form 106I.)	Your expenses	
		ip expenses for your residence. In	clude first mortgage 4. \$		0.00
	payments and any rent for the	ground or lot.	4. 3		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. 9	6	0.00
	4b. Property, homeowner's,	or renter's insurance	4b. \$	·	0.00
	4c. Home maintenance, re	pair, and upkeep expenses	4c. \$	<u> </u>	0.00

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Deb	tor 1	Prasad, Mannu	Case numb	per (if known)	
	4d.	Homeowner's association or condominium dues	4d.	\$	0.00
5.		tional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
-			-	<u> </u>	
6.	Utilit	ies:			
	6a.	Electricity, heat, natural gas	6a.	\$	0.00
	6b.	Water, sewer, garbage collection	6b.	\$	0.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Specify:	6d.	\$	0.00
7.	Food	l and housekeeping supplies	7.	\$	0.00
8.	Child	Icare and children's education costs	8.	\$	0.00
9.	Cloth	ning, laundry, and dry cleaning	9.	\$	0.00
10.	Pers	onal care products and services	10.	\$	0.00
11.	Medi	cal and dental expenses	11.	\$	0.00
12.		sportation. Include gas, maintenance, bus or train fare.	40	Φ.	0.00
40		ot include car payments.	12.	·	
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.		itable contributions and religious donations	14.	\$	0.00
15.		rance. ot include insurance deducted from your pay or included in lines 4 or 20.			
		Life insurance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
		Health insurance	15b.	·	0.00
		Vehicle insurance	15c.	·	0.00
		Other insurance. Specify:	15d.		0.00
16.		s. Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
	Spec		16.	\$	0.00
17.	Insta	Ilment or lease payments:			
	17a.	Car payments for Vehicle 1	17a.	\$	0.00
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
		Other. Specify:	17c.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as		Φ.	0.00
40		icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19.		r payments you make to support others who do not live with you.	40	\$	0.00
20	Spec	rreal property expenses not included in lines 4 or 5 of this form or on Sched	19.	r Incomo	
20.		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.		0.00
		Property, homeowner's, or renter's insurance	20c.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20e.	\$	0.00
21.		r: Specify:	21.	·	0.00
		· · -			
22.		monthly expenses. Add lines 5 through 21.		\$	0.00
		result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedu late the total expenses for Debtor 1 and Debtor 2.	le J to		
		1			
23.	Line	not used on this form.			
24.		ou expect an increase or decrease in your expenses within the year after you			
		kample, do you expect to finish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?	r mortgage p	ayment to increase	or decrease because of a
	■ N	, , ,			
	_ ''	υ. <u> </u>			

■ No.	
☐ Yes.	Explain here:

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Fill in t	this information to identify ye	our case:			
Debtor 1	Mannu Prasad				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JER	RSEY, TRENTON DIVISION		
Case numb	per				
(if known)				_ c	heck if this is an
				aı	mended filing
o	E 400D				
Official I	Form 106Dec				
Decla	ration About a	an Individual	Debtor's Sche	dules	12/15
f two marri	ied people are filing together	, both are equally respons	sible for supplying correct info	ormation.	
·/	!!a 4!a!a famm!a amaa f!		u amandad ashadulas Malifo	falas atatamant asmasal	:
			or amended schedules. Makin uptcy case can result in fines		
	oth. 18 U.S.C. §§ 152, 1341, 1			ар 10 ү =00,000, отроот.	ар 10 =0
	Sign Below				
Did yo	ou pay or agree to pay some	one who is NOT an attorno	ey to help you fill out bankrup	otcy forms?	
	No				
□ Y	Yes. Name of person Attach Bankruptcy Per				n Preparer's Notice,
				Declaration, and Signatur	e (Official Form 119)
Under	penalty of periury. I declare	that I have read the summ	nary and schedules filed with	this declaration and	
	ey are true and correct.	mat i navo roda ino canini	iary and concurred mea min.	ino doolaration and	
v ,	/Maria Barra I		V		
	/ Mannu Prasad		Cignoture of Dobto	O	
	annu Prasad gnature of Debtor 1		Signature of Debto	N Z	
Si	gridiano di Dobidi 1				

Date

Date _**January 30, 2020**

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	EU to dita								
		information to ident	ry your case:						
Del	otor 1	Mannu Prasad First Name	Middle Name	Last Name					
Del	otor 2								
(Spo	ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY, TRENTON DIVISION					
	se number				П	Check if this is an			
					_	mended filing			
Of	ficial Fo	rm 107							
			Affairs for Individ	duals Filing for B	ankruptcy	4/19			
info	rmation. If me				qually responsible for supply additional pages, write your i				
Pai			rital Status and Where You	Lived Before					
1.	What is your	current marital statu	s?						
	MarriedNot mar	ried							
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?							
	■ No								
	■ NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. state					y property state or territory? co, Texas, Washington and Wis				
	■ No								
	_	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (Offi	cial Form 106H).					
_									
Par	t 2 Explain	n the Sources of You	r Income						
4.	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including part-		ar years?			
	□ No								
		in the details.							
		in the detaile.							
			Debtor 1	0	Debtor 2	0			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
For last calendar year: (January 1 to December 31, 2019)		•	■ Wages, commissions, bonuses, tips	\$16,307.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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De	btor 1 Pr	asad, Mannu		Cas	se number (if known)		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2018)			■ Wages, commissions, bonuses, tips	\$19,841.00	☐ Wages, commonuses, tips	nissions,	
			☐ Operating a business		Operating a b	ousiness	
5.	Include incother publication you are fili	come regardless of whe ic benefit payments; per ng a joint case and you	me during this year or the two ther that income is taxable. Exam nsions; rental income; interest; di have income that you received to come from each source separate	ples of other income are alim vidends; money collected from gether, list it only once under	n lawsuits; royalties; Debtor 1.		
	■ No						
	☐ Yes.	Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Payments Yo	ou Made Before You Filed for I	Bankruntev			
6.	Are either No.	Neither Debtor 1 nor individual primarily for During the 90 days be No. Go to line Yes List below creditor. payments	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or household fore you filed for bankruptcy, did e 7. v each creditor to whom you paid Do not include payments for do s to an attorney for this bankruptce ent on 4/01/22 and every 3 years	mer debts. Consumer debts purpose." you pay any creditor a total of a total of \$6,825* or more in mestic support obligations, so by case.	f \$6,825* or more? one or more paymen uch as child support	ts and the to	otal amount you paid that
	■ Yes.		or both have primarily consulters on the sound of the sou		f \$600 or more?		
			v each creditor to whom you paid				
			s for domestic support obligations ruptcy case.	s, such as child support and a	alimony. Also, do not	include pay	ments to an attorney for
	Creditor	's Name and Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for
7.	Insiders in which you business y	clude your relatives; any are an officer, director,	or bankruptcy, did you make a general partners; relatives of an person in control, or owner of 20 oprietor. 11 U.S.C. § 101. Includensider.	ny general partners; partnersh % or more of their voting secu	ips of which you are urities; and any mana	a general pa ging agent,	artner; corporations of including one for a
		Name and Address	Dates of payme	ent Total amount	Amount you	Reason fo	or this payment
			. •	paid	still owe		

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

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Dei	Prasad, Mannu		Cas	e number (# known)		
	insider? Include payments on debts guaranteed or cosig	ned by an insider.				
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for th	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures	P			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, for	reclosed, garnish	ed, attached, se	eized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or finance accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				ncial institution, s	set off any amo	unts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar		rty in the possessio	n of an assignee	for the benefit of	of creditors, a
	■ No					
Par	Yes List Certain Gifts and Contributions					
	Within 2 years before you filed for bankrupt No	cy, did you give any gifts	with a total value o	f more than \$600	per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 p	er Describe the gifts		Dates	s you gave	Value
	person	bescribe the girts		the gi	, ,	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift or contr		or contributions wi	ith a total value of	more than \$60	0 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name		contributed	Dates contr	s you ibuted	Value
	Address (Number, Street, City, State and ZIP Code)					

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Det	Prasad, Mannu			ase number	if known)	
	or gambling?					
	■ No □ Yes. Fill in the details.					
	how the loss occurred	Include	ibe any insurance coverage for the lose the amount that insurance has paid. Lise the claims on line 33 of Schedule A/B: Properties of the state of t	st pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			, ,		
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition prepresentation.	eparin	g a bankruptcy petition?			y to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred		Date payment or transfer was made	Amount of payment
	Law Office of Mary Beth Schroeder 802 Main St. Unit 2A Toms River, NJ 08753		1800		January 5, 2020	\$1,800.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credii Do not include any payment or transfer that you have a larger than you hav	tors or	to make payments to your creditors?		transfer any propert	y to anyone who
	Person Who Was Paid Address		Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment
 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than protransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you			para III CX	onango	
19.	Within 10 years before you filed for bankri beneficiary? (These are often called asset-p ■ No ■ Yes. Fill in the details.	uptcy, rotectio	did you transfer any property to a self on devices.)	-settled trus	st or similar device o	f which you are a
	Name of trust		Description and value of the propert	ty transferre	ed	Date Transfer was
			р			made

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Deb	otor 1	<u> P</u>	rasad, Mannu				Cas	se number (if known)	
Par	t 8:	Lis	st of Certain Financial Accounts, In	strum	nents, Safe Deposi	Boxes, and Stora	age	Units	
20.	sold Inclu hou	I, mo ude d ses, No	year before you filed for bankruptoved, or transferred? checking, savings, money market, pension funds, cooperatives, asso	or oth	er financial accou	nts; certificates of			
		Yes	. Fill in the details.						
		dres	f Financial Institution and S (Number, Street, City, State and ZIP		Last 4 digits of account account number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	casi	h, or	now have, or did you have within 1 other valuables?	year I	before you filed fo	r bankruptcy, any	saf	fe deposit box or other deposito	ry for securities,
	_	No	Fill in the details						
	_		. Fill in the details.						
			f Financial Institution S (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, and ZIP Code)		Des	scribe the contents	Do you still have it?
22.	Hav	e voi	u stored property in a storage unit	or pla	ce other than you	r home within 1 ve	ear I	before you filed for bankruptcy?	•
		No	. Fill in the details.		, , , , , , , , , , , , , , , , , , , ,	,			
					D 11 41 4 4 4				
			f Storage Facility S (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, and ZIP Code)		Des	scribe the contents	Do you still have it?
Par	4 O.	اما 🔳	entify Property You Hold or Contro	l for S	Samaana Elaa				
23.	Do y	ou heone	nold or control any property that so			ude any property	you	u borrowed from, are storing for	or hold in trust for
		Yes	. Fill in the details.						
			s Name S (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City Code)		Des	scribe the property	Value
Par	t 10:	Gi	ve Details About Environmental Inf	forma	tion				
For	the p	urpo	se of Part 10, the following definiti	ons a	pply:				
	toxi	c sul	mental law means any federal, state ostances, wastes, or material into t ng the cleanup of these substance	he air	, land, soil, surface				
	Site	mea	ns any location, facility, or properterate, or utilize it, including dispose	y as c	lefined under any	environmental lav	v, w	hether you now own, operate, o	r utilize it or used to
			us material means anything an env pollutant, contaminant, or similar		nental law defines	as a hazardous w	aste	e, hazardous substance, toxic su	ıbstance, hazardous
Rep	ort a	ll not	tices, releases, and proceedings th	at you	ı know about, rega	ırdless of when th	еу (occurred.	
24.	Has	any	governmental unit notified you tha	ıt you	may be liable or p	otentially liable u	nde	er or in violation of an environme	ntal law?
■ No									
		Yes	. Fill in the details.						
			f site S (Number, Street, City, State and ZIP Code)		Governmental u Address (Number, ZIP Code)	nit Street, City, State and		Environmental law, if you know it	Date of notice

Case 20-11512-KCF Doc 1 Filed 01/30/20 Entered 01/30/20 14:06:43 Desc Main Document Page 40 of 65 Debtor 1 Case number (if known) Prasad, Mannu 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Mannu Prasad Signature of Debtor 2 Mannu Prasad Signature of Debtor 1 Date January 30, 2020 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107 Statement of Finance

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Fill in thi	is information to identi	fy your case:		
Debtor 1	Mannu Prasad			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NE	W JERSEY, TRENTON DIVISION	
0				
Case number				Check if this is an amended filing
Official For	rm 108			
Statemer	nt of Intentio	n for Indiv	iduals Filing Under Chapt	er 7 12/15
				1210
If you are an indiv	vidual filing under chap	oter 7, you must fill	out this form if:	
creditors have	claims secured by yo	ur property, or		
you have lease	ed personal property a	nd the lease has no	t expired.	
	ver is earlier, unless th		ou file your bankruptcy petition or by the date set time for cause. You must also send copies to the o	
	ople are filing together e the form.	in a joint case, both	n are equally responsible for supplying correct info	rmation. Both debtors must sign
	nd accurate as possibl our name and case nun		needed, attach a separate sheet to this form. On the	e top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims		
1. For any credito	ors that you listed in Pa	art 1 of Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the
information be		hat is callatoral	Milest de ver intend te de with the preparty that	Did you along the property
identity the cre	editor and the property t	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	□ N0
			☐ Retain the property and redeem it. ☐ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
			☐ Retain the property and redeem it.	☐ Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				_
Creditor's			☐ Surrender the property.	□ No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	LI INU
			Retain the property and redeem it. Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	

Official Form 108

Creditor's

securing debt:

☐ Surrender the property.

☐ No

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Del	otor 1 Prasad, N	lannu	Case number (if known)	
[F	name: Description of property securing debt:		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
or he	any unexpired persinformation below.	Do not list real estate leases. Unexpir	Schedule G: Executory Contracts and Unexpired ed leases are leases that are still in effect; the lease tee does not assume it. 11 U.S.C. § 365(p)(2).	
Des	scribe your unexpi	red personal property leases		Will the lease be assumed?
Les	sor's name:	Kentwood Construction Co, Inc		□ No
	scription of leased perty:	Residential apartment lease for	1085. per month.	■ Yes
Jnd		ry, I declare that I have indicated my in	ntention about any property of my estate that secu	res a debt and any personal
X	s/ Mannu Pras	•	X	
	Mannu Prasad Signature of Debte		Signature of Debtor 2	
	Date Janua	ry 30, 2020	Date	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey, Trenton Division

In r	re Prasad, Mannu		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATT	ORNEY FOR I	DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankrupto	cy, or agreed to be pa	id to me, for service	that s rendered or to
	For legal services, I have agreed to accept		\$ <u></u>	1,800.00	
	Prior to the filing of this statement I have received			1,800.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp firm.	pensation with any other person	on unless they are me	mbers and associate	s of my law
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				ıy law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	ects of the bankruptcy	y case, including:	
	a. Analysis of the debtor's financial situation, and rendeb. Preparation and filing of any petition, schedules, statec. Representation of the debtor at the meeting of credited. [Other provisions as needed]	ement of affairs and plan whi	ch may be required;	-	ankruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee The flat fee does not include any repres			mation hearing.	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an bankruptcy proceeding.	y agreement or arrangement f	for payment to me for	r representation of th	ne debtor(s) in
	January 30, 2020	/s/ Mary Beth So	chroeder		
_	Date	Mary Beth Schro	oeder		
		Signature of Attorn Law Office of Ma	ary Beth Schroed	er	
		802 Main St. Uni	it 2A		
		Toms River, NJ			
			oedermb-law.com	ı	
		Name of law firm			

Case 20-11512-KCF Doc 1 Filed 01/30/20 Entered 01/30/20 14:06:43 Desc Main Document Page 44 of 65 United States Bankruptcy Court District of New Jersey, Trenton Division

IN RE:		Case No.
Prasad, Mannu		Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITOR MAT	RIX
The above named debtor(s) hereby v	erify(ies) that the attached matrix listing credito	ors is true to the best of my(our) knowledge.
Date: January 30, 2020	Signature: /s/ Mannu Prasad	
	Mannu Prasad	Debtor
Date:	Signature:	
		Joint Debtor, if any

Bank of America PO Box 982238 El Paso, TX 79998-2238

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899-8803

Capital One PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA N PO Box 30281 Salt Lake City, UT 84130-0281

Chase Cardmember Services PO Box 15548 Wilmington, DE 19886-5548

Comenity Bank/Express PO Box 182789 Columbus, OH 43218-2789

Credit One Bank NA PO Box 98872 Las Vegas, NV 89193-8872 Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Hsbc Bank PO Box 2013 Buffalo, NY 14240-2013

HSBC Card Services, PO Box 2103 Buffalo, NY 14240-2103

Jpmcb Card PO Box 15369 Wilmington, DE 19850-5369

Macys/dsnb PO Box 8218 Mason, OH 45040-8218

Merrick Bank Corp PO Box 9201 Old Bethpage, NY 11804-9001

Midland Credit Management 350 Camino de la Reina Ste 100 San Diego, CA 92108-3003 Midland Credit Manangement, INC 8875 Aero Dr Ste 200 San Diego, CA 92123-2255

PayPal Credit PO Box 5018 Timonium, MD 21094-5018

Pnc Bank PO Box 3180 Pittsburgh, PA 15230-3180

PNC Bank Consumer 2730 Liberty Ave MSC P5-PCLC-A1-R Pittsburgh, PA 15222

Pnc Bank, N.A.
PO Box 3180
Pittsburgh, PA 15230-3180

Syncb/cheapoair Dc C/o PO Box 965022 Orlando, FL 32896-5022

Syncb/ppc PO Box 965005 Orlando, FL 32896-5005 Wells Fargo Card Services PO Box 77053 Minneapolis, MN 55480-7753

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Fill in this infor	mation to identify your case:		Ch	eck one	e box only as di	rected in this form and	in Form
Debtor 1	Mannu Prasad		12:	2A-1Su	pp:		
Debtor 2							
(Spouse, if filing)				■ 1. Th	nere is no presi	umption of abuse	
United States I	Bankruptcy Court for the: District of New Je Division	rsey, Trenton		а	pplies will be m	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case number (if known)						does not apply now bedout it could apply later.	ause of qualified:
				☐ Che	eck if this is a	n amended filing	
Official F	orm 122A - 1						
	7 Statement of Your Cu	rrent Mor	thly Inc	ome	<u> </u>		12/19
a separate sheet number (if know military service,	and accurate as possible. If two married people to this form. Include the line number to which to n). If you believe that you are exempted from a promplete and file Statement of Exemption from alculate Your Current Monthly Income	he additional infor presumption of ab	mation applies. use because you	On the tu do not	top of any additi have primarily	onal pages, write your i	name and case nuse of qualifying
1. What is y	our marital and filing status? Check one or	nly.					
■ Not m	arried. Fill out Column A, lines 2-11.						
	ed and your spouse is filing with you. Fill or	ut both Columns	A and B, lines 2	2-11.			
☐ Marrie	ed and your spouse is NOT filing with you.	You and your s	pouse are:				
☐ Livi	ing in the same household and are not lega	ally separated. F	ill out both Colu	umns A	and B, lines 2-	11.	
☐ Livi per	ing separately or are legally separated. Fill halty of perjury that you and your spouse are leart for reasons that do not include evading the I	out Column A, lir gally separated ur	nes 2-11; do no nder nonbankruj	t fill out ptcy law	Column B. By that applies or	checking this box, you	
101(10A). For 6 months, add	erage monthly income that you received from all rexample, if you are filing on September 15, the 6-nd d the income for all 6 months and divide the total by the rental property, put the income from that property is	nonth period would 6. Fill in the result.	be March 1 throu Do not include a	ugh Augu ny incom	ist 31. If the amore to	unt of your monthly incom han once. For example, if	e varied during the
	, , , , , , , , , , , , , , , , , , ,		,	Colum Debto	nn A	Column B Debtor 2 or non-filing spouse	
Your gro payroll de	ss wages, salary, tips, bonuses, overtime, ductions).	and commission	ns (before all	\$	1,345.50	\$	
3. Alimony	and maintenance payments. Do not include B is filled in.	payments from a	a spouse if	\$	0.00	\$	
of you or from an u roommate	nts from any source which are regularly partyour dependents, including child support nmarried partner, members of your household, es. Include regular contributions from a spous clude payments you listed on line 3	 Include regular your dependents 	contributions , parents, and	n. \$	0.00	\$	
Net incor	ne from operating a business, profession,						
			otor 1				
	eipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
•	and necessary operating expenses		Copy here ->	. ¢	0.00	\$	
	hly income from a business, profession, or fai	m \$	Copy liere ->	· •	0.00	Ψ	
o. Net incor	ne from rental and other real property	Del	otor 1				
Gross ros	egints (hefore all deductions)	\$ 0.00					
	eipts (before all deductions) and necessary operating expenses	-\$ 0.00					
•	hly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	dividends, and royalties	Ψ	.,	\$	0.00	\$	
. microst.	arriasino, ana i Cyaniss						

Official Form 122A-1

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Prasad, Mannu Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of 0.00 title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,345.50 1,345.50 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,345.50 Multiply by 12 (the number of months in a year) **x** 12 16.146.00 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. NJ Fill in the number of people in your household. 1 68.464.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. 14a Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Mannu Prasad Mannu Prasad Signature of Debtor 1 Date **January 30, 2020**

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Debtor 1	Prasad, Mannu	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

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	_	
Fill in this information to identify your case:	Check the appropriate box as di	rected in
Debtor 1 Mannu Prasad	lines 40 or 42:	
Debtor 2 (Spouse, if filing)	According to the calculations require Statement:	ed by this
District of New Jersey, Trenton	■ 1. There is no presumption of all	buse.
United States Bankruptcy Court for the: <u>Division</u>	☐ 2. There is a presumption of ab	ASIL
Case number(if known)	2. There is a presumption of ab	use.
(in talenty)	☐ Check if this is an amended fill	ing
Official Form 122A - 2		-
Chapter 7 Means Test Calculation		04/1
To fill out this form, you will need your completed copy of Chapter 7 Statemer	nt of Your Current Monthly Income (Official Form 122A-	.1)
Be as complete and accurate as possible. If two married people are filing toget is needed, attach a separate sheet to this form, Include the line number to which write your name and case number (if known).		
Part 1: Determine Your Adjusted Income		
Copy your total current monthly income. Copy line 11 fr	rom Official Form 122A-1 here=> \$	1,345.50
2. Did you fill out Column B in Part 1 of Form 122A-1?		
■ No. Fill in \$0 for the total on line 3.		
☐ Yes. Is your spouse Filing with you?		
☐ No. Go to line 3.		
☐ Yes. Fill in \$0 the total on line 3.		
Adjust your current monthly income by subtracting any part of your spo household expenses of you or your dependents. Follow these steps:	ouse's income not used to pay for the	
On line 11, Column B of Form 122A-1, was any amount of the income you repo you or your dependents?	orted for your spouse NOT regularly used for the household	expenses of
■ No. Fill in 0 for the total on line 3.		
☐ Yes. Fill in the information below:		
State each purpose for which the income was used	Fill in the amount you	
For example, the income is used to pay your spouse's tax debt or to support other than you or your dependents.	are subtracting from your spouse's income	
	\$	
	\$	

Total.	\$ 0.00	
	Copy total here=> \$	0.00
Adjust your current monthly income. Subtract line 3 from line 1.	\$ 1,3	345.50

Official Form 122A-2

	Case 20-11512-KCF Doc 1 Filed Docui					
ebtor 1	Prasad, Mannu	Case number (if known)				
Part 2:	Calculate Your Deductions from Your Income					
ansv	The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.					
actua	Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.					
If you	r expenses differ from month to month, enter the average	expense.				
Whe	never this part of the from refers to you, it means both you	and your spouse if Column B of Form 122A-1 is filled in.				
5.	The number of people used in determining your ded	uctions from income				
	Fill in the number of people who could be claimed as exen number of any additional dependents whom you support. people in your household.					
Natio	onal Standards You must use the IRS National	I Standards to answer the questions in lines 6-7.				
	Food, clothing, and other items: Using the number of fill in the dollar amount for food, clothing, and other items	people you entered in line 5 and the IRS National Standards, \$				
	7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categoriespeople who are under 65 and people who are 65 or olderbecause older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.					
Peop	ole who are under 65 years of age					
	7a. Out-of-pocket health care allowance per person	\$55.00_				
	7b. Number of people who are under 65	X1				
	7c. Subtotal. Multiply line 7a by line 7b.	\$\$ 55.00 Copy here=> \$\$ 55.00				
Peop	le who are 65 years of age or older					
	7d. Out-of-pocket health care allowance per person	\$114.00_				
	7e. Number of people who are 65 or older	×				
	7f Subtotal. Multiply line 7d by line 7e.	\$ 0.00 Copy here=> +\$ 0.00				

55.00

Copy total here=>

55.00

7g. Total. Add line 7c and line 7f

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Prasad, Mannu Debtor 1 Case number (if known) **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in 524.00 the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,401.00 listed for your county for mortgage or rent expenses..... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment -NONE-Repeat this Copy amount on 0.00 0.00 Total average monthly payment here=> line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly paymen) from line 9a (mortgage or Copy 1.401.00 1.401.00 here=> rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating 0.00 expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

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Debtor 1	Prasad, Mannu		Case number (if known)
13.	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.		
Vel	Describe Vehicle 1:		
13a.	Ownership or leasing costs using IRS Local Standard		\$0.00_
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.		
	To calculate the average monthly payment here and on line contractually due to each secured creditor in the 60 months aft. Then divide by 60.		
	Name of each creditor for Vehicle 1	Average monthly payment	
		\$	
	Total Average Monthly Payment	\$	Copy here => -\$ 0.00 Repeat this amount on line 33b.
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0 nicle 2 Describe Vehicle 2:), enter \$0	\$ 0.00 Copy net Vehicle 1 expense here => \$ 0.00
13d.	Ownership or leasing costs using IRS Local Standard		\$ 0.00
13e.	Average monthly payment for all debts secured by Vehicle 2. Eleased vehicles.	Do not include costs for	
	Name of each creditor for Vehicle 2	Average monthly payment	
		_ \$	
	Total Average Monthly Payment	\$	Copy Repeat this amount on line 33c.
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0), enter \$0	\$ 0.00 Copy net Vehicle 2 expense here => \$ 0.00
14.	Public transportation expense: If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you use the contract of		
15.	Additional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation.		

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Debtor 1 Prasad, Mannu Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Soci your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from wever, if you expect to receive a tax refund, you must divide the expected refund by 12 and ne total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	164.34
17.	Involuntary deductions: Tunion dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, sts.		
	Do not include amounts that	are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments or	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	lly amount that you pay for education that is either required: b, or		
	• •	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	any elementary or secondary school education.	\$	0.00
22.	required for the health and v	Denses, excluding insurance costs: The monthly amount that you pay for health care that is velfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7.		
	Payments for health insuran	ice or health savings accounts should be listed only in line 25.	\$	0.00
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses at Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	3,088.34

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Debtor 1 Prasad, Mannu Case number (if known)

Additional Expense Deductions These are additional deductions allowed by the Means Test.						
	Note: Do not include any expense allowances listed in lines 6-24.					
25.	5. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.					
	Health insurance \$	0.00				
	Disability insurance \$	0.00				
	Health savings account + \$	0.00				
	Total \$	0.00	Copy total here=>	.\$	0.00	
	Do you actually spend this total amount?					
	■ No. How much do you actually spend?					
	■ Yes \$	S				
26.	Continued contributions to the care of household or fam continue to pay for the reasonable and necessary care and suphousehold or member of your immediate family who is unable contributions to an account of a qualified ABLE program. 26 U	pport of an elderly, c to pay for such expe	hronically ill, or disabled member of your	\$	0.00	
27.	Protection against family violence. The reasonably necess you and your family under the Family Violence Prevention and					
	By law, the court must keep the nature of these expenses conf	fidential.		\$	0.00	
28.	Additional home energy costs. Your home energy costs are	e included in your ins	urance and operating expenses on line 8.			
	If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.					
	You must give your case trustee documentation of your actual claimed is reasonable and necessary.	expenses, and you	must show that the additional amount	\$	0.00	
29.	Education expenses for dependent children who are you \$170.83* per child) that you pay for your dependent children we elementary or secondary school.					
	You must give your case trustee documentation of your actual reasonable and necessary and not already accounted for in lin		must explain why the amount claimed is			
	* Subject to adjustment on 4/01/22, and every 3 years after that	at for cases begun o	n or after the date of adjustment.	\$	0.00	
30.	40. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
	To find a chart showing the maximum additional allowance, go this form. This chart may also be available at the bankruptcy c		s specified in the separate instructions for			
	You must show that the additional amount claimed is reasonable	ole and necessary.		\$	0.00	
31.	Continuing charitable contributions. The amount that you winstruments to a religious or charitable organization. 26 U.S.C.			+\$	0.00	
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	0.00	

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Debtor 1 Prasad, Mannu Case number (if known)

33 Fc	ctions for Debt Payment						
	or debts that are secured by an interest indother secured debt, fill in lines 33a thr	n property that you own, including home ough 33e.	e mortga	iges, vehicle loa	ans,		
	o calculate the total average monthly paymer e 60 months after you file for bankruptcy. Th	nt, add all amounts that are contractually due nen divide by 60.	to each	secured creditor	in		
	Mortgages on your home:					Average payment	monthly
33a.	Copy line 9b here				=>	\$	0.00
	Loans on your first two vehicles:						
33b.	Copy line 13b here				.=>	\$	0.00
33c.					=>	\$	0.00
3d.	List other secured debts:						
lame	of each creditor for other secured debt	Identify property that secures the debt		Does paymer include taxes insurance?			
				□ No			
	-NONE-			☐ Yes		\$	
-					,		
				☐ No			
-				□ Yes	;	\$	
				□ No			
				☐ Yes	+5	\$	
-					¬	Ψ	
					Сору		
13e.	Total average monthly payment. Add lines	33a through 33d	\$	0.00	total here=	=> \$ <u> </u>	0.00
34. Ar ot	re any debts that you listed in line 33 sec her property necessary for your suppor No. Go to line 35.	cured by your primary residence, a vehic	cle, or			=> \$ <u> </u>	0.00
34. Ar ot ■	re any debts that you listed in line 33 secher property necessary for your suppor No. Go to line 35. Yes. State any amount that you must paline 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments	cle, or	Total cure		Mon	thly cure
34. Ar ot □	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, divi	cle, or	Total cure amount	here	Mon amo	thly cure
34. Ar ot ■	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, divi	cle, or	Total cure amount		Mon amo	thly cure
34. Ar ot	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, divi	cle, or	Total cure amount	here=	Mon amo	thly cure
84. Ar ot	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, dividentify property that secures the debt	silisted in de by	Total cure amount	÷ 60 =	Mon amo	thly cure
34. Ar ot	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, dividentify property that secures the debt	cle, or	Total cure amount	here=	Mon amo	thly cure unt
Name	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must particle 33, to keep possession of your 60 and fill in the information below. The of the creditor In the information below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, dividentify property that secures the debt To priority tax, child support, or alimony - ti	silisted in de by	Total cure amount	÷ 60 =	Mon amo	thly cure unt
Name	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below. The open own any priority claims such as a perpart due as of the filing date of your below.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, dividentify property that secures the debt To priority tax, child support, or alimony - ti	silisted in de by	Total cure amount	÷ 60 =	Mon amo	thly cure unt
Name -NO	re any debts that you listed in line 33 secher property necessary for your support. No. Go to line 35. Yes. State any amount that you must part line 33, to keep possession of your 60 and fill in the information below. The open own any priority claims such as a perpast due as of the filing date of your below. No. Go to line 36.	cured by your primary residence, a vehice tor the support of your dependents? ay to a creditor, in addition to the payments property (called the cure amount). Next, dividentify property that secures the debt To priority tax, child support, or alimony - trankruptcy case? 11 U.S.C. § 507.	s listed in de by	Total cure amount	÷ 60 =	Mon amo	thly cure unt

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Prasad, Mannu Debtor 1 Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link foBankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. No. Go to line 37. ☐ Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense if you were filing under Chapter 13 here=> 0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 3.088.34 expense allowances Copy line 32, All of the additional expense deductions 0.00 Copy line 37, All of the deductions for debt payment 0.00 3.088.34 3.088.34 Total deductions \$ Copy total here.....=> Part 3: Determine Whether There is a Presumption of Abuse 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 1,345.50 39b. Copy line 38, Total deductions 3.088.34 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy 0.00 0.00 Subtract line 39b from line 39a here=>\$ For the next 60 months (5 years) x 60 Сору 0.00 0.00 39d. **Total.** Multiply line 39c by 60 \$ here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$8,175*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$13,650*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$8,175*, but not more than \$13,650*. Go to line 41. *Subject to adjustment on 4/01/22, and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1	Pras	sad, Mannu	Case	e number (<i>if known</i>)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled on Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	ut <i>A</i> 41a	x .25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(\$	Copy here=>	\$
40 D .		Multiply line 41a by 0.25			F0/	
of	your u	ne whether the income you have left over after subtracting all allowed dec unsecured, nonpriority debt. e box that applies:	aucti	ons is enough to pay 2	5%	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>Ther</i> o Part 5.	re is ı	no presumption of abuse.		
		39d is equal to or more than line 41b. On the top of page 1 of this form, chece. You may fill out Part 4 if you claim special circumstances. Then go to Part 5		x 2, There is a presumpti	on of	
Part 4:	Giv	ve Details About Special Circumstances				
13. Do y reas	ou hav	we any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. \S 707(b)(2)(B).	ents	of current monthly inco	me for	which there is no
I	lo. Go	o to Part 5.				
		Il in the following information. All figures should reflect your average monthly exposu may include expenses you listed in line 25.	ense	or income adjustment for	r each it	em.
	ne	ou must give a detailed explanation of the special circumstances that make the excessary and reasonable. You must also give your case trustee documentation of ljustments.				
	G	Sive a detailed explanation of the special circumstances		erage monthly expense ncome adjustment		
	_		\$			
	_		\$		_	
			\$		_	
			\$		_	
Part 5:	Sig	n Below				
	By si	gning here, I declare under penalty of perjury that the information on this stateme	ent a	nd in any attachments is	rue and	correct.
		/ Mannu Prasad				
		annu Prasad gnature of Debtor 1				
Da	ate Ja	anuary 30, 2020 M / DD / YYYY				
	IVII	WI/DD / II(T				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. $\underset{B201B\ (Form\ 201B)}{\textbf{Case}}\,\underset{(12/09)}{\textbf{20-11512-KCF}}$

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United States Bankruptcy Court District of New Jersey, Trenton Division

IN RE:		Case No
Prasad, Mannu		Chapter 7
	Debtor(s)	•

CERTIFICATION OF NOTI UNDER § 342(b) OF T	CE TO CONSUMER DEB HE BANKRUPTCY COD	
Certificate of [Non-Attorne	y] Bankruptcy Petition Pre	eparer
I, the [non-attorney] bankruptcy petition preparer signing the definition of the Bankruptcy Code.	otor's petition, hereby certify the	at I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	petit the S prin	ial Security number (If the bankruptcy tion preparer is not an individual, state Social Security number of the officer, cipal, responsible person, or partner of pankruptcy petition preparer.)
X	(Rec	quired by 11 U.S.C. § 110.)
Certificat	e of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and read the	ne attached notice, as required b	by § 342(b) of the Bankruptcy Code.
Prasad, Mannu	X /s/ Mannu Prasad	1/30/2020
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	_ X	
	Signature of Joint Debto	or (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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